



## PSYCHOLOGY DOCTORAL INTERNSHIP PROGRAM

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### Fargo VA Health Care System

2101 North Elm St.

Fargo, ND 58102

800-410-9723 ext. 3150

<http://www.fargo.va.gov/>



**MATCH Number: 220711**

**Applications Due: November 20<sup>th</sup>, 2015**

## ACCREDITATION STATUS

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The doctoral internship program in Psychology at the Fargo VAHCS is accredited by the Commission on Accreditation of the American Psychological Association. The next site visit will be during the academic year 2021.

Questions related to our accreditation status can also be directed to the Commission on Accreditation:

Office of Program Consultation and Accreditation

American Psychological Association

750 1<sup>st</sup> Street, NE

Washington, DC 20002-4242

1-800-374-2721

<http://www.apa.org/education/grad/program-accreditation.aspx>

## APPLICATION AND SELECTION PROCEDURES

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Applicants must meet the following prerequisites to be considered for our program:

1. Doctoral student in an APA-accredited Clinical or Counseling Psychology program or in an APA approved respecialization training program in Clinical or Counseling Psychology
2. Approval for internship status by graduate program training director
3. A minimum of 250 direct intervention and 50 direct assessment hours of supervised graduate level pre-internship practicum experience
4. U.S. citizenship
5. Male applicants born after 12/31/1959 must have registered for the draft by age 26
6. Matched interns are subject to fingerprinting and background checks. Match result and selection decision are contingent upon passing these screens
7. As are other employees, matched interns are subject to random selection for drug screening exams once on staff

## ***Selection and Interview Process***

A selection committee comprised of those involved in training reviews applications, with a focus on goodness of fit between intern goals and facility training opportunities. The VA Health Care System in which our training program resides is an Equal Opportunity Employer. Our training program is committed to ensuring a range of diversity among trainees, and we select candidates representing diverse backgrounds. All things being equal, consideration is given to applicants representing elements of diversity, including, but not limited to, age, disability, ethnicity, gender, gender identity, language, national origin, race, religion, culture, sexual orientation, social economic status, and military service. These factors may be indicated on your application (please see below under Application Procedures).

A subgroup of applicants are offered in-person interviews to allow an opportunity to learn more about our training site. Phone interviews are offered for individuals unable to make an in-person visit. We adhere to guidelines established by the Association of Psychology Postdoctoral and Internship Centers (APPIC) and follow match policies. Our internship site agrees to abide by the APPIC policy that no person at our training facility will solicit, accept, or use any ranking-related information from any intern applicant. **The Fargo VA Health Care System's Match Number is 220711.** Applicants must obtain an Applicant Agreement Package from NMS and register for the Match in order to be eligible to match to our internship programs. You can request an Applicant Agreement Package from NMS through the Matching Program web site or by contacting NMS.

## ***Application Procedures***

Complete the APPIC online AAPI and designate our program match number. We request three letters of recommendation, with at least one being from someone familiar with your academic work. Submit no more than four letters. Should you choose, you may also identify representation with an element of diversity (please see Selection and Interview Process above). All application materials must be submitted through the online AAPI and received by **November 20<sup>th</sup>**.

## ***Contact Information***

Questions regarding the application process can be addressed to:

**Jessica Gustin, Ph.D.**  
Director of Training, Psychology  
Fargo VA Healthcare System  
2101 North Elm St  
Fargo, ND 58102  
Phone: 1-800-410-9723 ext. 3125  
Jessica.Gustin@va.gov

## **PSYCHOLOGY SETTING**

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The Fargo VA Health Care System (VAHCS) is a general medical and surgery facility serving a Veteran population of more than 89,000 from North Dakota, northwestern Minnesota, and northeastern South Dakota since 1929. The center provides primary and secondary medical, surgical, psychiatric inpatient care, primary and specialized outpatient care, and rehabilitative care. Tertiary care is referred to the Minneapolis VA Health Care System. The center operates ten community-based outpatient clinics (CBOCs) in primarily highly rural locations (i.e., Bemidji, Bismarck, Dickinson, Fergus Falls, Grafton, Grand Forks, Jamestown, Minot, Devils Lake, and Williston). The Health Care System maintains an active research program and it supports residents in Internal Medicine, Surgery, and Psychiatry.

The hospital has 71 facility beds, 50 of which are in the Community Living Center (long term care unit for those with extended rehabilitation needs). In Fiscal Year 2014, there were 1,352 Veterans seen on an

inpatient basis, and 33,336 seen for outpatient services. Roughly 91% of Veterans served at the Fargo VA are male; 54% are 65 years of age or older and an additional 18% are between the ages of 55 and 64.

The majority of Veterans served by the Fargo VAHCS and surrounding CBOC's reside in rural or highly rural areas (74%). We are committed to providing quality, innovative services to our Veterans in rural communities. Psychology has greatly expanded tele-medicine services, including group therapies. Assessment, therapy, and consultation services are also available to those in rural communities via Home Based Primary Care up to a distance of 50 miles from Fargo. Additionally, most CBOC sites have a Mental Health staff member on site.

Psychology Service is integrated within the Mental Health Service Line, which also consists of Psychiatry, Pharmacy, Social Work, and the Substance Abuse Treatment Program. Psychology Service includes 14 doctoral Psychologists, one bachelor's level Psychology Technician, and a Peer Support Specialist. Psychologists have diverse theoretical orientations, clinical specialties, and interests. Several Psychologists specialize in co-occurring PTSD and Substance Use, Health Psychology, and Home Based Primary Care. They also serve on the Inpatient Psychiatry Unit, PTSD Clinical Team, Substance Abuse Treatment Program, Social Work Service, Pain Management Committee, Primary Care Mental Health Clinic, and the Specialty Mental Health Clinic. Psychologists are exclusively responsible for completing all compensation and pension examinations and Psychology services are highly valued across the Center. Staff has been able to participate on committees in their respective areas of interest. Psychologists enjoy a very supportive and enjoyable work environment; and typically report much satisfaction with their VA careers.

Ongoing training is a priority. In-house training is consistently provided on a range of topics (i.e., ethics, updated and innovative assessment measures, cultural diversity). Psychologists frequently attend national and regional trainings and conferences related to their individual areas of interest. The majority of psychologists have attended national VA training in Prolonged Exposure and Cognitive Processing Therapy for PTSD, Cognitive Behavioral Therapy for Depression, Motivational Interviewing and Modified Problem Solving Therapy. Psychologists participate in monthly conference calls addressing the successful utilization of empirically supported treatments (i.e., Seeking Safety and Prolonged Exposure Therapies), continually review current literature, and subsequently disseminate findings to other staff members. Psychology staff have presented for Psychiatry Grand Rounds on topics such as the Recovery Treatment Model, Evidence-Based Therapies for PTSD, Treatment of OIF/OEF Veterans, and PTSD and Substance Use.

## TRAINING MODEL AND PROGRAM PHILOSOPHY

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Our scholar-practitioner training philosophy focuses on a breadth of clinical skills, while highlighting rural mental health care. This includes a focus on consideration of research as a guide for clinical practice. Emphasis is placed on utilization of empirically supported treatments. Clinicians monitor clients' progress by administering appropriate self-report assessment measures (i.e. BDI-II, PCL, BAI) on a regular basis. By actively collecting outcome data, we continually assess the utility of provided treatments and make modifications as needed. Results of assessments are monitored in order to guide treatment as well as to examine clients' response to treatment. Dependent upon a client's presenting concerns and goals for treatment, treatments may include individual or group therapies. The majority of our treatments are brief and active in nature. If justified, long term treatment may be offered. There is a strong emphasis on assessment and consultation. As such, all interns participate in a year-long assessment clinic that offers instruction in both personality and cognitive assessment. Our program also places a special emphasis on diversity, particularly in regards to rural mental health care and Native American culture, by which a number of more experiential type trainings are also facilitated (i.e. participation in Native American Smudging Ceremonies, opportunities to participate in Sweat Lodge Ceremony).

The training program is very collaborative in nature and frequent consultation among psychology staff and interns is encouraged. Interns will choose their own rotation placements in order to fulfill their individual training interests and needs. In addition, interns are also able to choose from a variety of minor rotations to further specialize their training and subsequently guide their own professional development.

## PROGRAM GOALS & OBJECTIVES

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Before and during orientation week, interns' prior training experiences are reviewed to develop a training plan specific to their needs. In keeping with our generalist philosophy, interns are encouraged to address those areas in which they have had limited experience (e.g., working with certain populations such as those with severe mental illness or substance abuse concerns).

Our program goals and objectives are as follows:

- Interns will develop competence in conducting psychological evaluation and assessment of adults with a variety of diagnostic concerns. An emphasis is placed on developing competence in diagnostic interviewing and administration/interpretation of psychometrically-validated instruments assessing personality and cognitive abilities.
- Interns will develop competence in providing psychological interventions to adults with a range of diagnoses. Trainees will be exposed to a range of therapeutic orientations and techniques with an emphasis on empirically supported modalities.
- Interns will develop competence in providing effective consultation, feedback, and translation of psychological principles to colleagues, other disciplines, patients, and families.
- Interns will demonstrate professional behavior consistent with professional standards and ethical guidelines. They will display an understanding of ethnic, cultural, gender, and sexual diversity.
- Interns will develop a professional identity based upon generalist abilities and will be prepared to begin work at the post-doctoral level. They will be aware of any areas for further development and be able to formulate appropriate career development plans.
- Interns will demonstrate skill integrating scientific literature into clinical practice. Trainees will apply clinical research findings to treatment decisions and case discussions. They will demonstrate competence in at least one empirically supported treatment.

## PROGRAM STRUCTURE

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At the beginning of the year, interns are expected to have entry level competence in adult psychological evaluation/assessment, psychological intervention, consultation, professional standards, ethical guidelines, and utilization of research to guide clinical decisions. Over the course of training, they will refine these skills in working toward clinical independence. In order to achieve this level of functioning, training will first emphasize breadth of knowledge by completing diverse clinical duties, obtaining supervision, and attending didactic trainings. Overarching clinical activities will focus on cognitive and personality assessment, provision of empirically supported therapies, and consultation (i.e. participation in interdisciplinary treatment team meetings and Mental Health staff meetings). Internship programming is generalist in nature.

Evaluation of progress in meeting both foundational competencies (i.e., understanding of ethics and cultural diversity issues, knowledge of scientific foundations of psychology) and functional competencies (i.e., assessment, intervention, consultation, research) will be measured through a variety of avenues including, but not limited to work samples, hypothetical case studies, and direct assessment. Progress toward goals will be continually evaluated, as well as formally completed following each rotation period. Interns will also review self-evaluation forms with primary rotation supervisors. Functionally, evaluation helps monitor trainees' readiness for entry to practice. Our minimal levels of achievement for

programming are directly linked to our evaluations, which directly correspond to the program's goals, objectives, and competencies.

In order for Interns to maintain good standing in the program they must:

- For the first and second training trimester, obtain no more than 20% ratings of "2" (*Close supervision needed*) for Goal/Competency areas on the Intern Evaluation
- At the mid-point of training experience, obtain no more than 20% ratings of "2" (*Close supervision needed*) for Goal/Competency areas on the Intern Assessment Clinic Evaluation and relevant Adjunctive Training Experience Evaluation forms
- Demonstrate progress in Goal/Competency areas where items on the Intern Evaluation, Intern Assessment Clinic Evaluation, and relevant Adjunctive Training Experience Evaluation forms have not been rated at a "4" or higher (*Little supervision needed*)
- By the mid-point of training, successfully complete required items of the *Fargo VAHCS Psychology Test Training Form*, which includes observing, role-playing, and administering assessments under observation
- No items in competency areas will be rated as a "1" (*Substantial supervision/remediation needed*)
- Not be found to have engaged in any significant unethical behavior

In order for Interns to successfully complete the program, they must:

- By the end of the last training period, obtain ratings of at least a "4" (*Little supervision needed*) in all items in each Goal/Competency area on Intern Evaluation, Intern Assessment Clinic Evaluation, and relevant Adjunctive Training Experience Evaluation forms
- Not be found to have engaged in any significant unethical behavior

### ***Training Schedule and Rotations***

During orientation week, interns will meet with the Training Director to plan their training schedule for the upcoming year. Three primary rotations will be selected, as well as a required year-long assessment clinic. Interns may also choose up to two adjunctive rotations to complete throughout the training year. The majority of interns will devote an average of three days time per week to their major rotation, one day to assessment clinic, and the remaining day to didactic and adjunctive trainings. Interns will be given flexibility in choosing rotation schedules; although asked to consider an approach consistent with generalist training. The following are offered as options for major rotations.

#### ***Major Rotations***

The Mental Health Clinic (General Psychiatry) – The Mental Health Clinic is a large outpatient program committed to interdisciplinary approach to treatment. The Clinic staff consists of psychiatrists, addiction counselors, pharmacists, nurses, nurse practitioners, social workers, psychology technician, peer support specialists, psychologists, and other trainees. Referrals are received from primary care, neurology, dementia care clinic, vocational rehabilitation, and various other entities throughout the VA system. The Clinic provides psychology interns an excellent opportunity to work with professionals from other disciplines in an outpatient setting. Clients are treated for a wide variety of diagnoses, including mood, anxiety, psychotic, personality, and adjustment disorders. A large percentage of clients also present with substance abuse disorders, allowing interns an opportunity to gain experience in treating dual diagnoses. The outpatient clinic would provide psychology interns with opportunities for training in a variety of psychological models (e.g., cognitive-behavioral, psychodynamic, interpersonal). Both long-term and brief psychotherapy interventions are utilized in individual therapy and group therapy treatment formats. Interns have the opportunity to receive specialized training in individual Cognitive Behavioral Therapy for Depression, as well as co-lead a variety of groups (e.g., Acceptance and Commitment Therapy for Problem Anger Group, Sleep Management Group, and a modified Dialectical Behavior Therapy Group). In addition to the variety of intervention opportunities, cognitive and personality assessment is highly emphasized in the training experience.

The Posttraumatic Stress Recovery (PTSR) Program – The PTSR Program is located within Psychology Services and is the main treatment location for clients with posttraumatic stress disorder or subclinical anxiety symptoms secondary to traumatic life events. This program treats a full range of both civilian and military traumatic events. The most common traumatic events experienced include combat-related life-threatening situations, sexual trauma, natural disasters, and car accidents. Interns in this program would receive specialized training in the assessment and treatment of patients with acute and chronic trauma-related disorders. Through clinical experience and supervision, students can expect to develop a comprehensive understanding of the sequelae of trauma and evidence-based treatment approaches for trauma-related disorders. The majority of clients are seen initially for a pre-therapy/orientation to treatment session designed to provide education on available treatment options and triage clients into the most appropriate service. Skills developed on this rotation include: time-limited psychotherapy with emphasis in Cognitive Processing Therapy or Prolonged Exposure, co-leading groups (e.g., Trauma Education, PTSD Family Education Group, Moral Injury Group), diagnosis and assessment of PTSD, and consultation to a team that includes those from other disciplines (i.e., Social Work, Chaplaincy).

Highly Rural Mental Health – The Fargo VA is responsible for nine Community Based Outpatient Clinics that serve an almost exclusively rural and highly rural population. This rotation would emphasize provision of services to Veterans in these outlying communities via tele-health, as well as potential travel up to 50 miles for Home Based Primary Care. Trainees would have an opportunity to provide in-home services (i.e., assessment and intervention) to Veterans residing in rural areas that may otherwise not have access to Psychology services. Interns would also be involved with providing empirically supported treatments as part of our highly successful tele-health programming, which includes both individual and group therapies. Another unique aspect of this rotation would involve the potential for interns to receive specialized training in rural mental health through collaboration with the University of North Dakota's Rural Psychology in Integrated Care (RPIC) program, funded by the US Department of Health and Human Services, Health Resources Service Administration (HRSA). Collaboration with their programming would include exciting opportunities for tele-health, as well as more specialized training in meeting dynamic rural needs and integrated primary care. This can include providing stigma reduction consultation in small communities, as well as collaborating with their program in providing public service announcements at local auto races, in order to increase mental health awareness. Finally, exceptional opportunities for research in rural mental health can be facilitated within this rotation.

Behavioral Health and Mental Health Primary Care– This rotation emphasizes development of skills needed to integrate psychological services within interdisciplinary treatment teams in medical settings. Major components of this rotation include brief evaluation and treatment of clinical and health psychology problems; triage decision-making to prioritize service delivery; consultation and collaboration with primary care providers for psychological and medical management; psychological assessment, individual and group psychotherapy, referral to specialty mental health programs; and coordination of care with the onsite Psychiatrists and Social Workers. Interns have the opportunity to take part in leading empirically based treatment groups on topics such as sleep, pain, and weight management. In addition, Interns will have the opportunity to develop skills in promoting healthy behaviors (i.e. physical activity) and help patients resolve other medically-related problems (i.e. pain management, treatment adherence, coping with illness, and disease management). Specialty training is provided in Motivational Interviewing. Interns also have the opportunity to work as a mental health liaison to a multidisciplinary Patient Aligned Care Team (PACT) within primary care. The intern attends weekly team meetings that focus on administrative and clinical issues.

Inpatient Hospitalization and Consultation– Psychology interns participate in multidisciplinary treatment teams focusing on the inpatient psychiatric care of patients with serious mental illness, chronic substance abuse, dementia-related conditions, chronic and acute suicidal risk, and a full range of psychotic disorders. They may also participate in the inpatient care of those on the Community Living Center (CLC), which is a long term care unit for those requiring extended rehabilitation and care following surgery and/or lengthy hospitalizations. Interns assist in direct patient care, lead therapy groups, and contribute to treatment planning. They help patients to better manage their psychiatric illnesses, increase self-efficacy, improve coping skills, and reinforce positive behaviors. Rotation opportunities include, but are not limited



to: attending multidisciplinary patient rounds and team meetings; conducting group psychotherapy; providing short-term individual psychotherapy when appropriate; conducting psychological assessments for diagnostic and treatment planning purposes; developing behavioral plans to manage disruptive or unhealthy behaviors; and assisting in coordinating treatment between the inpatient and outpatient service.

In addition to the above major rotations, opportunities to complete minor rotations in the following areas will also be available.

Compensation and Pension Examinations – Psychology staff is solely responsible for completing Mental Health Compensation and Pension Examinations. Interns can choose to receive formalized VA training and supervision in conducting Compensation and Pension Examinations. This training would be especially valuable for those desiring continued employment with the VA system, as well as those with an interest in assessment.

Homelessness – The Fargo VA has received national recognition for its outstanding homeless program that facilitates Veterans' access to community resources in order to obtain permanent community-based housing. The program offers case management services and assists homeless Veterans in obtaining food, clothing, shelter, transportation, safety, ID cards and medical care. Interns are able to participate in programming and provide consultation to staff.

Substance Abuse Treatment Program –The Substance Abuse Treatment Program (SATP) offers evaluations, individual therapy, continuing care, and intensive outpatient treatment. Interns would be offered an opportunity to provide assessment and intervention services to those with substance use concerns, as well as provide consultation to SATP staff.

Home Based Primary Care – Interns may receive additional experience working with rural and geriatric populations by completing a minor rotation in home based primary care. This opportunity would particularly enhance trainee's skill in cognitive assessment and interdisciplinary consultation.

Administrative Experience – Interns may shadow the Psychology Service Supervisor. This experience would include attending various meetings within the hospital, involvement in projects and policy, and program development/adjustment.

Tele-Health – As mentioned, due to the large number of rural Veterans served by our facility, a significant percentage of our services are provided via tele-health. Interns will receive formalized tele-health training. Upon demonstrating competencies at face to face levels, interns will provide services via our well-developed tele-health program that offers assessment, individual therapy, and group therapy programming.

Supervision of Practicum Students – While interns will receive four hours of required supervision per VA guidelines, they may also choose to provide supervision to practicum students training at the Fargo VAHCS. This would be in addition to the required supervision by licensed psychologists and would include consultation with the intern's supervisor regarding the provision of supervision.

## SUPERVISION

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Interns will receive at least 2 hours of individual supervision and at least 2 hours of group supervision per week. All members of the Psychology staff are available for consultation. Interns will be scheduled for regular contact with the Director of Training. Supervision styles and theoretical orientations vary. Components of supervision include audio recording, observation in group therapies, role-plays, review of documentation, co-therapy, case presentations, and consultative/supervisory work.

## DIDACTICS

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Interns will meet for a weekly didactic seminar, where a variety of topics related to program competencies will be reviewed (i.e. personality and cognitive assessment, various professional development issues). Interprofessional training is highly valued. Psychology staff as well as other disciplines ,will present on such topics and some training may span weeks in duration. Case presentations and Psychiatry Grand Rounds (which involves presentations to Physicians, Psychologists, Residents, and other medical staff on specific psychiatric related issues) are additional avenues of didactic training. Interns are themselves expected to present at a topic of expertise at a Grand Rounds or a local university/venue during their training, and are also authorized time to participate in an Interprofessional Journal Club, where they meet with trainees from other mental health disciplines (i.e. Social Work, Psychiatry, Pharmacy) on a bi-weekly basis.

## TRAINING TERM

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The internship requires a one-year, full-time training commitment beginning in August, with interns averaging 40 hours a week. Interns are entitled to 10 federal holidays and earn sick leave and vacation (annual leave) at a rate of 4 hours per two-week pay period (total of 13 days of each). Interns may also request additional leave (approved absence) to attend trainings, conferences, and/or graduate related activities (these are reviewed as requests arise).

## STIPEND, BENEFITS, AND RESOURCES

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Current stipend is anticipated to be \$23,974 per year. State and federal income tax and FICA (Social Security) are withheld from interns' salary. The United States Government covers interns for malpractice under the Federal Tort Claims Act. Interns are eligible to receive health, dental and life insurance coverage. Interns may also be eligible for the Child Care Subsidy Program, and are able to utilize the facility's gym on campus.

All Interns are provided with office space, secured computers, and office supplies. They are given access to Psych Info database and other resources through the medical library. A comprehensive assessment/testing library is updated and maintained by the Psychology Technician.

## FARGO-MOORHEAD COMMUNITY

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The metropolitan Fargo area has a population of about 200,000 and is located 3 hours away from the Minneapolis-St. Paul area. Fargo-Moorhead has one of the lowest unemployment rates in the country, a consistently low crime rate, and very affordable housing. There are three major colleges within a two-mile radius and a warm community that features a wide variety of recreational activities, rich cultural events, and frequent sporting events. Outdoor recreational activities are in abundance. In the summer months activities include, biking, swimming, fishing, golfing, and camping. In the winter months, individuals can enjoy ice fishing, cross-country skiing, sledding, and hockey. The Fargo-Moorhead area is an ideal community where students can gain education and start their careers.



## TRAINING STAFF

*Feel free to contact staff by email indicated below; they are happy to respond to questions.*

<b>Name</b>	<b>Degree</b>	<b>Date</b>	<b>School</b>	<b>Clinical &amp; Research Interest/Expertise</b>	<b>Email</b>
Lindsay Anderson	Clinical Psychology, Ph.D.	2012	University of Colorado and Colorado Springs	Aging/Geropsychology, Long-term care, Alzheimer's Disease and Dementia, Caregiving in Late Life	Lindsay.Anderson5@va.gov
Angela Collins	Clinical Psychology, Ph.D.	2009	University of Nevada-Reno	Anxiety disorders, Dialectical Behavior Therapy, Health Psychology, Administration	Angela.Collins3@va.gov
Gillian Freeborn	Clinical Psychology, Psy.D.	2013	Argosy University-Twin Cities	Behavioral Health, Pain Management; Palliative Care	Gillian.Freeborn@va.gov
Adam Guilmino	Counseling Psychology, Ph.D.	2006	University of North Dakota	Recovery Coordinator, Inpatient Psychology	Adam.Guilmino@va.gov
Robert Gulkin	Clinical Psychology, Ph.D.	1975	University of Memphis	General Clinical Interests, Assessment, Treatment and Diagnosis of Anxiety	Robert.Gulkin@va.gov
Jessica Gustin	Clinical Psychology, Ph.D.	2009	University of South Dakota	Psychology Training, Co-Occurring Psychiatric and Substance Use Disorders, Dialectical Behavior Therapy, Posttraumatic Stress Disorder	Jessica.Gustin@va.gov
Angie Heil	Psychology, B.S.	2003	North Dakota State University	Research, Psychological Testing, Administration	Angela.Heil@va.gov
Jodi Johnson	Clinical Psychology, Psy.D.	2015	Minnesota School of Professional Psychology	Primary Care Mental Health Integration, Interdisciplinary Team Process, PTSD and Moral Injury, Psychological Assessment, Training and Supervision	Jodi.Johnson5@va.gov
Von King	Psy.D.	1991	Argosy University	Compensation and Pension Exams, Health Psychology, Addiction Theory and Treatment, Supervision, Eclectic Modalities	Von.King@va.gov
Casey Lawler	Clinical Psychology, Ph.D.	2006	Washington State University	Health Behavior Change, Evidence-Based Treatments, Cognitive Assessments, Posttraumatic Stress Disorder	Casey.Lawler@va.gov

Sandra Mills	Clinical Psychology, Ph.D.	2011	University of North Dakota	Psychological Assessment, Trauma, Addictions, Acceptance and Commitment Therapy, Strengths Based Approach, Cognitive Behavior Therapy	Sandra.Mills@va.gov
Karl Nelson	Clinical Psychology, Ph.D.	2003	University of Hawaii at Manoa	Substance Abuse Treatment, Addictive Disorders, Research Activities	Karl.Nelson2@va.gov
Margo Norton	Clinical Psychology, Ph.D.	1998	University of North Dakota	Posttraumatic Stress Disorder, Post Deployment Mental Health	Margo.Norton@va.gov
Jay Phillippi	Counseling Psychology, Ph.D.	2011	University of North Dakota	Forensic and Psychological Assessment, Compensation and Pension Exams, Recovery Model, Positive/Strengths Based Psychology	Jay.Phillippi@va.gov
Scott Ressler	Clinical Psychology, PsyD	2014	Minnesota School of Professional Psychology	Primary Care Mental Health, Brief Psychotherapy, Psychological Assessment	Scott.Ressler@va.gov